

Testimony before the Appropriations Committee
March 11, 2010
Opposition to the Governor's Deficit Mitigation Plan

Good evening, distinguished chairs and members of the Appropriations Committee. My name is Alicia Woodsby, and I am the Public Policy Director for the National Alliance on Mental Illness, CT (NAMI-CT). NAMI-CT is the largest member organization in the state of people with psychiatric disabilities and their families. I am here today to testify on the Governor's March 1st Deficit Mitigation Plan.

NAMI-CT is strongly opposed to the following proposals in the Deficit Mitigation Plan:

- Increasing co-pays for dually eligible recipients;
- Imposing co-pays on the **entire** adult Medicaid population—including adults in HUSKY A—for both medical services and drugs;
- Removing the critical protection for people who are stable on psychotropic medications
- Eliminating eyeglass coverage for adults under Medicaid;
- Suspending coverage of non-emergency dental services for adults under Medicaid;
- Restricting access to all types of health care under Medicaid by adopting a narrow definition of medical necessity.

Connecticut will receive \$66 million in new federal funds under the federal stimulus bill to provide financial relief to our Medicaid program and protect prescription drug coverage for people who are dually eligible. The state can access \$40 million of that sum for the current fiscal year. HHS Secretary Sebelius announced that the funds are specifically intended to “help states as they struggle to maintain Medicaid,” and noted that President Obama recognizes “the critical role Medicaid plays in the health of our most vulnerable citizens.”

The Governor's Plan takes back these stimulus funds and makes further cuts to Medicaid and medication access. These new cuts would compound numerous cuts agreed to last year's budget that have already begun to impact the same population of very low-income seniors and people with physical and psychiatric disabilities with incomes on average between \$500 and \$600 per month (or about a \$140 per week). This is unjustifiable. It would only take a portion of the relief funds to prevent this further damage and to honor the intent of the stimulus dollars. The federal government recognizes the long-term negative impact of reductions in Medicaid spending for Connecticut's economy and is providing the relief necessary so that states can avoid making these difficult policy decisions. The Governor is not hearing the message.

There are significant human and economic costs associated with these policies. Multiple studies show that restricting access to psychiatric medications leads to higher costs through increased emergency room use and hospitalization. Lack of access to treatment and medications also leads many to incarceration and homelessness. Further, studies confirm that “prescription drug co-pays, in particular, have an adverse effect on consumer use of medication as prescribed”.¹ **In short, co-pays are proven to lead to people not getting their medications.** Medicaid co-pays have been twice repealed and rejected in our state because the harm and costs are so well-documented.

¹ National Council for Community Behavioral Healthcare, State Policy Focus: Medicaid Copays, April 2007.

NAMI-CT urges you **to preserve the protection for mental health medications and to reject co-pays for people on Medicaid.**

Thank you for your time. I am happy to answer any questions that you may have.